

September 29, 2020

Mayor Bradshaw and City Councilors City of Ketchum Ketchum, Idaho

Mayor Bradshaw and City Councilors:

Recommendation to Adopt the COVID-19 Blaine County Risk Level Plan

Recommendation and Summary

Staff is recommending the Council adopt the COVID-19 Blaine Country Risk Level Plan.

"I move to adopt the COVID-19 Blaine County Risk Level Plan."

The reasons for the recommendation are as follows:

- The South Central Public Health District (SCPHD) developed a plan establishing criteria SCPHD will use to monitor COVID-19 disease trends and resources.
- SCPHD gives authority to local elected officials to implement their own measures, which may be more or less restrictive than those included in the SCPHD plan.
- Blaine County has developed a more stringent and pro-active plan than the SCPHD to keep our cases low.
- The plan provides information about current impacts. It does not impose any protective measures. The Council may use the information about risk to make decisions about imposing, maintaining or lifting health orders.

Introduction and History

In early September, Blaine County developed guidelines and are assessing risk based on the Harvard Global Health Institute guidelines. The COVID-19 Blaine County Risk Level Plan is a product of collaboration between SCPHD and Blaine County Medical Director Terry O'Connor, and his adaptive planning committee colleagues. Timely data regarding hospital capacity, COVID-19 cases and testing rates are compiled and then reconciled with local data for accuracy. This data is evaluated with the pattern of disease local providers are treating in the community.

Analysis

The key difference between the plans are the metrics. The Blaine County Plan measures daily cases per 100,000 residents on a 7-day rolling average*, while the SCPHD Plan measures daily cases per 10,000 residents on a 14-day rolling average. A 7-day rolling average provides a more immediate sense of trends. Measuring cases per 100,000 establishes a lower threshold for reporting and decision making. Because Blaine County cases are lower than the rest of the Health District, the more pro-active plan will help encourage each jurisdiction to consider measures to protect the public sooner. A more distinct

plan takes into consideration Blaine County as a tourist destination with a highly transient population. The Blaine County risk assessment is updated each Thursday and can be accessed on the County's COVID-19 Dashboard and, upon City Council adoption, the City of Ketchum's COVID-19 webpage.

On Monday, September 28, individual Council members will meet with Fire Chief Bill McLaughlin, Blaine County Commissioner Angenie McLeary and South Central Health District Director Melody Bawyer. They will answer questions and further describe the differences in the plans.

The Blaine County Plan is supported by Blaine County School District, Senior Connection, St. Luke's Wood River, The Advocates, Sun Valley Economic Development, The Community School, City of Hailey, NAMI, The Hunger Coalition, Local Food Alliance, Sun Valley Institute, and other local organizations.

*The metrics on the attached Blaine County Risk Level Plan show a 14-day rolling average. The purpose was to be aligned with the SCPHD plan when it was released to the public. Beginning Thursday, October 1, metrics will be based on a 7-day rolling average.

Sustainability Impact

There is no sustainability impact.

Financial Requirement/Impact

There is no financial requirement.

Attachments:

Blaine County Risk Level Plan SCPHD Risk Level Plan



COVID-19 BLAINE COUNTY RISK LEVEL PLAN

EFFECTIVE DATE: 9/1/2020

As Idaho's response to the COVID-19 pandemic transitions from a statewide response to a regional and local response, the following COVID-19 Blaine County Risk Level Plan was developed to help guide policy-making in Blaine County and the cities of Ketchum, Sun Valley, Hailey Bellevue, and Carey. In addition, this Blaine County Risk Level Plan will help guide local businesses and organizations in their operational decisions during the pandemic. Blaine County aims to mitigate the rapid spread of COVID-19 in order to protect the health and economic wellbeing of residents and visitors, and to prevent overwhelming first responders, the healthcare system, and personal protective equipment (PPE) supplies in our region.

The COVID-19 Blaine County Risk Level Plan is based on the Harvard Global Health Institute's recommendations and is more stringent than the South Central Public Health District's (SCPHD) COVID-19 Regional Risk Level Plan. Due to the fact that Blaine County cases are lower than the rest of the Health District, we have the opportunity to have a more pro-active plan and keep our cases low. Further, we recognize that Blaine County is unique from the rest of the Health District because we are a tourist destination and have a highly transient population. Therefore, Blaine County is not insular and needs a distinct plan that takes the nature of our community into consideration.

The Blaine County Risk Level Plan establishes the criteria Blaine County and cities of Ketchum, Sun Valley, Hailey, Bellevue, and Carey, and local businesses and organizations can use to monitor COVID-19 disease trends, resources, and risk level, and make appropriate decisions. The established criteria and related outputs are similar to those in the SCPHD Regional Risk Level Plan with some modifications.

Blaine County and the cities of Ketchum, Sun Valley, Hailey, Bellevue, and Carey, and local businesses and organizations will consult the South Central Public Health District for its expertise and guidance during the pandemic and will work closely with SCPHD as the local jurisdictions, businesses, and organizations implement the COVID-19 Blaine County Risk Level Plan and SCPHD implements the COVID-19 Regional Risk Level Plan. Local elected officials in Blaine County and cities have the authority to implement their own local plan and preventative measures, which may be more restrictive than those included in the SCPHD Regional Risk Level Plan to do what they deem necessary to protect the health of the residents they serve.

THIS PLAN IS SUBJECT TO CHANGE AS MORE INFORMATION BECOMES AVAILABLE

This plan will not be in effect indefinitely; however, it is not possible to determine an end date at this time. The risk assessment and mitigation strategies included in this plan will be in effect until a COVID-19 vaccine becomes available, treatment options for COVID-19 are readily available, other mitigating factors currently not known are identified, <u>OR</u> until the plan is modified.

WHAT TO KNOW ABOUT BLAINE COUNTY'S COVID-19 RISK LEVELS:

- The risk levels are applied to the entire county
- Risk levels can increase or decrease
- In ALL risk levels, the preventive measures outlined in the Minimal Risk Level should be followed. *Always prepare for the next risk level*.
- In addition to metrics determining exposure risk, local officials will closely monitor and may take into consideration for movement to a different risk level the following:
 - Input from hospital partners, South Central Public Health District, and Idaho
 Department of Health and Welfare
 - Trends in COVID-19 testing, including turn-around time of test results
 - Epidemiological investigation capacity
 - COVID-related hospitalizations and deaths
 - Syndromic surveillance of emergency department visits with COVID-like symptoms



RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
MINIMAL	1. NEW DAILY CASES < 1 PER 100,000 POPULATION (14 DAY ROLLING AVERAGE) AND	AT THE GREEN LEVEL, COMMUNITIES ARE ON TRACK FOR CONTAINMENT AS LONG AS THEY MAINTAIN ROUTINE LEVELS OF VIRAL TESTING (I.E., THIS IS NOT A REFERENCE TO ANTIBODY TESTING) AND CONTACT TRACING SUFFICIENT TO CONTROL SPIKES AND OUTBREAKS.
	2. COVID-19 TESTING POSITIVE RATE < 1% AND	BLAINE COUNTY IN PARTNERSHIP WITH SCPHD, LOCAL GOVERNMENTS, AND HEALTHCARE PARTNERS WILL EDUCATE, INFORM, AND SHARE COORDINATED MESSAGES WITH STAKEHOLDERS AND THE PUBLIC THROUGHOUT ALL LEVELS.
	3. REGIONAL HOSPITAL CAPACITY FOR CARE IS NORMAL	REGARDLESS OF THE RISK LEVEL THROUGHOUT THE REMAINDER OF THE PANDEMIC, EVERYONE IS ENCOURAGED TO DO THE FOLLOWING: Carefully monitor your health Stay home if you are sick
AL		 Maintain physical distance of at least 6 feet from others (outside of immediate family) whenever possible Wash hands frequently for at least 20 seconds or use hand sanitizer
MINIMAL		 Vulnerable populations (older adults, individuals with underlying health conditions) take extra precautions Get a seasonal flu shot Maintain a healthy life-style and take extra measures to increase overall health
		 Wear face coverings in public that fully cover the nose and mouth
RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
MODERATE	NEW DAILY CASES IS BETWEEN 1 to 10 PER 100,000 POPULATION (14 DAY ROLLING AVERAGE) AND/OR	AT THE YELLOW LEVEL, THERE MAY BE SPORADIC IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING:
	2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 1% to 5%	 Increase education, information sharing, and messaging Limit indoor mass gatherings (recommend 1 person per 64 sq. ft. of space) to 50 people if appropriate physical
MODERATE	AND/OR 3. REGIONAL HOSPITAL CAPACITY FOR CARE IS IMPACTED (MEDICAL SURGE CAPACITY STILL AVAILABLE)	 distancing can be maintained. Limit outdoor mass gatherings to 150 people. Require face coverings in public settings Extra precautions for vulnerable populations (older adults, individuals with underlying health conditions) Teleworking where possible and feasible with business
	 BED CAPACITY REACHES 80% STAFFING AND RESOURCE SHORTAGES 	 releworking where possible and reasible with business operations Minimize non-essential travel Strict policies for staff and visitors to avoid potential outbreaks in congregate living facilities (long-term care, nursing homes, correctional facilities, etc.) Schools should implement strategies in response to

RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
HIGH	1. NEW CASES DAILY IS BETWEEN 10 to 25 PER 100,000 POPULATION (14 DAY ROLLING AVERAGE)	AT THE ORANGE LEVEL, COMMUNITY SPREAD HAS ACCELERATED. SCPHD <u>OR</u> COMMUNITIES <i>MAY</i> INSTITUTE SOME OR ALL OF THE FOLLOWING:
HIGH RISK	AND/OR 2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 5 to 10% AND/OR 3. REGIONAL HOSPITAL CAPACITY FOR CARE IS IMPACTED (MEDICAL SURGE CAPACITY STILL AVAILABLE) • BED CAPACITY REACHES 85% • SIGNIFICANT STAFFING AND RESOURCE SHORTAGES AND/OR 4. SIGNIFICANT OUTBREAK(S) OCCURRING AT: • Hospitals/Healthcare Providers/EMS • Critical Infrastructure Services (fire, law enforcement, utilities, solid waste etc.) • Congregate Living Facilities (assisted living facilities, nursing homes, correctional facilities) • Schools/institutions of higher learning • Mass gatherings/events that limit public	 Increase education, information sharing, and messaging Require use of face coverings Limit of indoor mass gatherings (recommend 1 person per 64 sq. ft. of space) to 10 people if appropriate physical distancing can be maintained). Limit outdoor mass gatherings to 50 people. Limit travel/visitors to the region as well as travel within the state to areas with high rates of spread (encourage 14-day self-quarantine) Self-isolation of vulnerable populations (older adults, individuals with underlying health conditions) Teleworking for those who are able Extra precautions for employees of congregate living facilities (long-term care, nursing homes, correctional facilities, etc.) and close facility to visitors Delivery/curb-side service for businesses, including food establishments Closures of bars and nightclubs Reduced occupancy in places of business and public buildings Virtual services for place of worship where possible Discontinuation of youth and adult sports/activities in which physical distancing is not possible Industry-specific measures/restrictions/closures Schools should implement strategies in response to these guidelines and those of the Idaho Back to School
	health's ability to conduct contact tracing 1. NEW CASES DAILY > 25/100,000	AT THE RED LEVEL, COMMUNITIES HAVE REACHED A
CRITICAL	POPULATION (14 DAY ROLLING AVERAGE) AND/OR 2. COVID-19 TESTING POSTIVE RATE	TIPPING POINT FOR UNCONTROLLED SPREAD AND CITIES, COUNTIES, AND/OR SCPHD MAY INSTITUTE ALL OR SOME OF THE FOLLOWING: Stay-At-Home Order issued Schools should implement strategies in response to
CRITICAL RISK	> 10% AND/OR 3. REGIONAL HOSPITAL CAPACITY FOR CARE IS SEVERLY IMPACTED (MEDICAL SURGE CAPACITY CANNOT BE MAINTAINED) • BED AND ICU CAPACITY REACHES 90% • MAJOR STAFFING AND RESOURCE SHORTAGES AND/OR	these guidelines and those of Idaho Back to School Framework 2020 Require use of face coverings No social gatherings Business closures, including food establishment dining rooms and industry-specific restrictions Continued closure of bars and nightclubs Continued industry-specific measures/restrictions/closures Prohibit visitation to long-term care facilities Travel advisories as needed 14-day self-quarantine for people entering from an area inside or outside Idaho with widespread ongoing transmission
	4. CRISIS STANDARDS OF CARE IMPLEMENTED	5656

DEFINITIONS

CRISIS STANDARDS OF CARE:

Guidance to help guide ethical decision-making for how to triage medical care when it has to be rationed.

Plan can be found on the <u>Idaho Department of Health</u> and Welfare's website.

MEDICAL SURGE CAPACITY:

Medical surge capacity refers to the ability to evaluate and care for a markedly increased volume of patients—one that challenges or exceeds normal operating capacity. The surge requirements may extend beyond direct patient care to include such tasks as extensive laboratory studies or epidemiological investigations.

Source

TIMELINE FOR MEASUREMENTS

Data to support the corresponding Health Risk Level and any related mitigation strategies will be posted each Thursday by 5 pm.

Health Risk Levels will be made on Thursdays based on the prior two weeks starting on a Sunday and ending on a Saturday. Movement from one risk level to a lesser risk level will occur at 14-day intervals (one incubation period for COVID-19), while advancement to a level of higher risk can occur at any time.

MOVEMENT BETWEEN RISK LEVELS

Determinations to move to a more restrictive risk level may be made mid-stage if any of the criteria below are met:

- Crisis standards of care are implemented
- Senior leadership at a local hospital indicates that further increases in cases in the community will overwhelm local hospital capacity
- Reported cases exceed > 25 daily new cases per 100,000 people in a defined population (e.g., town, city, or county) or if new case rate adversely impacts SCPHD's ability to respond.

REFERENCES

- Key Metrics for COVID Suppression: A framework for policy makers and the public. July 1, 2020.
- Essential information for states and counties to publicly report

Supporting Partners



























COVID-19 REGIONAL RISK LEVEL PLAN

EFFECTIVE DATE: 8/5/2020

AS IDAHO'S RESPONSE to the COVID-19 pandemic transitions from a statewide response to a regional response, the following plan has been developed by South Central Public Health District (SCPHD). The plan is applicable to all counties within SCPHD's region: Blaine, Camas, Cassia, Gooding, Jerome, Lincoln, Minidoka, and Twin Falls.

This document establishes the criteria SCPHD will use to monitor COVID-19 disease trends and resources. The established criteria and related outputs will inform the SCPHD Board of Health and guide decisions to assess risk levels and for moving between stages, placing or removing restrictions, or providing recommendations to local jurisdictions to place or remove restrictions.

South Central Public Health District aims to mitigate the rapid spread of COVID-19 in order to protect the health and wellbeing of residents in the district, and to prevent overwhelming first responders, the healthcare system, and personal protective equipment (PPE) supplies in our region. Idaho Code 39-414(2) outlines that Idaho's public health districts shall "do all things required for the preservation and protection of the public health and preventative health...." Furthermore, it is desire of the SCPHD Board of Health to minimize the impact to local economies as much as possible while still protecting public health.

The SCPHD Board of Health and Director will be responsible for the implementation of this plan and will collaborate with local elected officials within the region. It is important to note that local elected officials have the authority to implement their own measures, which may be more <u>OR</u> less restrictive than those included in this plan, to do what they deem necessary to protect the health of the residents they serve.

THIS PLAN IS SUBJECT TO CHANGE AS MORE INFORMATION BECOMES AVAILABLE

This plan will not be in effect indefinitely; however, it is not possible to determine an end date at this time. The risk assessment and mitigation strategies included in this plan will be in effect until a COVID-19 vaccine becomes available, treatment options for COVID-19 are readily available, other mitigating factors currently not known are identified, <u>OR</u> until the plan is modified or rescinded by the Board of Health.

WHAT TO KNOW ABOUT SCPHD's COVID-19 RISK LEVELS:

- The risk levels may be applied at the town, city, county, geographic, or regional level.
- **Different areas of SCPHD's region may be at different risk levels.** Risk levels can increase or decrease.
- In ALL risk levels, the preventive measures outlined in the Minimal Risk Level should be followed. *Always prepare for the next risk level*.
- In addition to metrics determining exposure risk, public health officials will closely monitor and may take into consideration for movement to a different risk level the following:
 - Input from hospital partners
 - Trends in COVID-19 testing, including positivity rate and turn-around time of test results
 - Supplies of Personal Protective Equipment (PPE) for healthcare providers/first responders
 - Epidemiological investigation capacity
 - COVID-related hospitalizations and deaths
 - Syndromic surveillance of emergency department visits with COVID-like symptoms



RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
MINIMAL	1. NEW DAILY CASES < 1 PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE	At the green level, communities are on track for containment as long as they maintain routine levels of viral testing (i.e., this is not a reference to antibody testing) and contact tracing sufficient to control spikes and outbreaks. SCPHD will educate, inform, and share messages with
	< 5% 3. HOSPITAL CAPACITY FOR CARE IS	stakeholders and the public throughout all levels. REGARDLESS OF THE RISK LEVEL THROUGHOUT THE
	NORMAL	REMAINDER OF THE PANDEMIC, EVERYONE IS ENCOURAGED TO DO THE FOLLOWING:
		 Stay home if you are sick Maintain physical distance of at least 6 feet from others (outside of immediate family) whenever possible
MAL		 Wear face coverings in public that fully cover the nose and mouth when physical distancing is not possible or is difficult to maintain Wash hands frequently for at least 20 seconds or use
MINIMAI		 hand sanitizer Vulnerable populations (older adults, individuals with underlying health conditions) take extra precautions
		Carefully monitor your health
RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
MODERATE	1. NEW DAILY CASES IS BETWEEN 1 to 2.5 PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE IS	AT YELLOW LEVELS, THERE MAY BE SPORADIC IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING:
MODERATE	PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE)	IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: • Increase education, information sharing, and messaging
MODERATE	PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 5% to 10%	 IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: Increase education, information sharing, and messaging Limitations on mass gatherings (recommend 1 person per 64 sq. ft. of space) or limit to 150 people if appropriate physical distancing can be maintained
MODERATE	PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 5% to 10% OR 3. HOSPITAL CAPACITY FOR CARE IS IMPACTED (MEDICAL SURGE CAPACITY STILL AVAILABLE) • BED CAPACITY REACHES 80%	 IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: Increase education, information sharing, and messaging Limitations on mass gatherings (recommend 1 person per 64 sq. ft. of space) or limit to 150 people if appropriate physical distancing can be maintained Required face coverings in public settings Extra precautions for vulnerable populations (older
MODERATE	PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 5% to 10% OR 3. HOSPITAL CAPACITY FOR CARE IS IMPACTED (MEDICAL SURGE CAPACITY STILL AVAILABLE)	 IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: Increase education, information sharing, and messaging Limitations on mass gatherings (recommend 1 person per 64 sq. ft. of space) or limit to 150 people if appropriate physical distancing can be maintained Required face coverings in public settings Extra precautions for vulnerable populations (older adults, individuals with underlying health conditions) Teleworking where possible and feasible with business operations
MODERATE RISK	PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) 2. COVID-19 TESTING POSITIVE RATE IS BETWEEN 5% to 10% OR 3. HOSPITAL CAPACITY FOR CARE IS IMPACTED (MEDICAL SURGE CAPACITY STILL AVAILABLE) • BED CAPACITY REACHES 80% • STAFFING AND RESOURCE	 IMPORTED CASES, AN UPTICK IN CLOSE CONTACT TRANSMISSION, OR ISOLATED CLUSTER OUTBREAKS. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: Increase education, information sharing, and messaging Limitations on mass gatherings (recommend 1 person per 64 sq. ft. of space) or limit to 150 people if appropriate physical distancing can be maintained Required face coverings in public settings Extra precautions for vulnerable populations (older adults, individuals with underlying health conditions) Teleworking where possible and feasible with business

RISK LEVEL	METRICS MONITORED	MITIGATION STRATEGIES
HIGH RISK	 NEW CASES DAILY IS BETWEEN 2.5 to 5 PER 10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) COVID-19 TESTING POSITIVE RATE IS BETWEEN 11% to 20%	AT ORANGE LEVELS, COMMUNITY SPREAD HAS ACCELERATED. SCPHD OR COMMUNITIES MAY INSTITUTE SOME OR ALL OF THE FOLLOWING: Increase education, information sharing, and messaging Required use of face coverings Limitations of mass gatherings (recommend 1 person per 64 sq. ft. of space) or limit to 50 people if appropriate physical distancing can be maintained Limited travel/visitors to the region as well as travel within the state to areas with high rates of spread (encourage 14-day self-quarantine) Self-isolation of vulnerable populations (older adults, individuals with underlying health conditions) Teleworking for those who are able Extra precautions for employees of congregate living facilities (long-term care, nursing homes, correctional facilities, etc.) and close facility to visitors Delivery/curb-side service for businesses, including food establishments Closures of bars and nightclubs Reduced occupancy in places of business and public buildings Virtual services for place of worship where possible Discontinuation youth and adult sports/activities in which physical distancing is not possible Industry-specific measures/restrictions/closures Schools should implement strategies in response to these guidelines and those of the Idaho Back to School Framework 2020
CRITICAL RISK	 NEW CASES DAILY > 5/10,000 POPULATION (FOURTEEN DAY ROLLING AVERAGE) COVID-19 TESTING POSTIVE RATE > 20%	At the red level, communities have reached a tipping point for uncontrolled spread and cities, counties, and/or SCPHD may institute all or some of the following: Stay-At-Home Order issued Schools should implement strategies in response to these guidelines and those of Idaho Back to School Framework 2020 Required use of face coverings No mass gatherings Business closures, including food establishment dining rooms and industry-specific restrictions Continued closure of bars and nightclubs Continued industry-specific measures/restrictions/closures Prohibited visitation to long-term care facilities Travel advisories as needed Travel advisories as needed quantime for people entering from an area inside or outside Idaho with widespread ongoing transmission

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MEDICAL SURGE CAPACITY:

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Source

TIMELINE FOR MEASUREMENTS

Data to support the corresponding Health Risk Level and any related mitigation strategies will be posted each Thursday by 5 pm.

Health Risk Levels will be made on Thursdays based on the prior two weeks starting on a Sunday and ending on a Saturday. Movement from one risk level to a lesser risk level will occur at 14-day intervals (one incubation period for COVID-19), while advancement to a level of higher risk can occur at any time.

MOVEMENT BETWEEN RISK LEVELS

Determinations to move to a more restrictive risk level may be made mid-stage if any of the criteria below are met:

- Crisis standards of care are implemented
- Senior leadership at a local hospital indicates that further increases in cases in the community will overwhelm local hospital capacity
- Reported cases exceed > 5 daily new cases per 10,000 people in a defined population (e.g., town, city, or county) or if new case rate adversely impacts SCPHD's ability to respond.

REFERENCES

- Key Metrics for COVID Suppression: A framework for policy makers and the public. July 1, 2020.
- Essential information for states and counties to publicly report